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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2000</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application No.</td> <td>097662,660</td> </tr> <tr> <td>Filing Date</td> <td>September 15, 2000</td> </tr> <tr> <td>First Named Inventor</td> <td>Lawrence A. Booth, Jr.</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Group/Art Unit</td> <td></td> </tr> <tr> <td>Attorney Docket No.</td> <td>42390P9139</td> </tr> </table>		Application No.	097662,660	Filing Date	September 15, 2000	First Named Inventor	Lawrence A. Booth, Jr.	Examiner Name		Group/Art Unit		Attorney Docket No.	42390P9139
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<p>TOTAL AMOUNT OF PAYMENT</p> <p>(\$)</p>		<p>DEC 11 2001</p> <p>PTO/PTAB OFFICE</p>													

<h3 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check one)</h3> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit any overpayments to:</p> <p>Deposit Account Number: 02-2666</p> <p>Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP</p> <p><input type="checkbox"/> Charge Any Additional Fee(s) Required Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <h3 style="text-align: center; margin: 0;">FEE CALCULATION</h3> <div style="border: 1px solid black; padding: 5px;"> <p>1. BASIC FILING FEE</p> <table style="width: 100%; font-size: small;"> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <td></td> <td></td> <td>101</td> <td>740</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td></td> <td></td> <td>106</td> <td>330</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td></td> <td></td> <td>107</td> <td>510</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td></td> <td></td> <td>108</td> <td>740</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td></td> <td></td> <td>114</td> <td>160</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$)</td> </tr> </table> <p>2. EXTRA CLAIM FEES</p> <table style="width: 100%; font-size: small;"> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> <tr> <td>Independent Claims</td> <td></td> <td>18.00</td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td>84.00</td> <td></td> </tr> </table> <p><small>**or number previously paid, if greater, For Reissues, see below</small></p> <table style="width: 100%; font-size: small;"> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <td></td> <td></td> <td>103</td> <td>18</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td></td> <td></td> <td>102</td> <td>84</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td></td> <td></td> <td>104</td> <td>260</td> <td>Multiple Dependent claim, if not paid</td> <td></td> </tr> <tr> <td></td> <td></td> <td>109</td> <td>84</td> <td>**Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td></td> <td></td> <td>110</td> <td>18</td> <td>**Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$)</td> </tr> </table> </div>	Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid			101	740	Utility filing fee				106	330	Design filing fee				107	510	Plant filing fee				108	740	Reissue filing fee				114	160	Provisional filing fee		SUBTOTAL (1)					(\$)	Total Claims	Extra Claims	Fee from below	Fee Paid	Independent Claims		18.00		Multiple Dependent		84.00		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid			103	18	Claims in excess of 20				102	84	Independent claims in excess of 3				104	260	Multiple Dependent claim, if not paid				109	84	**Reissue independent claims over original patent				110	18	**Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$)	<h3 style="text-align: center; margin: 0;">FEE CALCULATION (continued)</h3> <p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Gregory D. Caldwell	Registration No. (Attorney/Agent)	39,926
Signature		Telephone	(503) 684-6200
		Date	11/21/01

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